

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. 10/77144	FILING DATE
							APP. EXAM. (S)	
							1/25 CLAIMS	
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
NO.	DEP.	NO.	DEP.	NO.	DEP.			
1	1	1		1		51		
2			1		1	52		
3						53		
4			1		1	54		
5	4		4		4	55		
6	4		4		4	56		
7	4		4		4	57		
8	4		4		4	58		
9	4		4		4	59		
10	4		4		4	60		
11	4		4		4	61		
12						62		
13						63		
14						64		
15						65		
16						66		
17						67		
18						68		
19						69		
20						70		
21						71		
22						72		
23						73		
24						74		
25						75		
26						76		
27						77		
28						78		
29						79		
30						80		
31						81		
32						82		
33						83		
34						84		
35						85		
36						86		
37						87		
38						88		
39						89		
40						90		
41						91		
42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
TOTAL NO.	1	1		1		TOTAL NO.		
TOTAL DEP.	29	29		29		TOTAL DEP.		
TOTAL CLAIMS	30	30		30		TOTAL CLAIMS		